This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 0150054

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra X	Fee	Fee =	Total
Basic Filing Fee Total Claims >20 Independent Claims >3	Sm./Lg. 201/101 203/103 202/102	-20 = 	x	Sm. Entity 345 9 39 130	Lg. Entity (90 - 18 - 78 - 260 - 6	490
Mult. Dep Claim Present Surcharge English Translation TOTAL FEE CALCULA	205/105			65	130	130
Fees due upon filing t	he application:					
Total Filing Fees Due	= \$	108	0			
Less Filing Fees Subn	nitted - \$	10	By			
BALANCE DUE	=\$					